FILED Apr 24, 2008 8:00 am Secretary of State 04-24-2008 90095 019 ***150.00

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCH				04-24-2008 90095 019 ****150.00
1. Entity Nam	MENT # P0500011746	64		
Principal Plac	ce of Business N	Aaiting Address	4	D079158
32 NE 1 AVE		32 NE 1 AVE.	•	0.0200
MIAMI, FL 3		MIAMI, FL 33132	•	
•				
				.]
DO NOT WRITE IN THIS SPA				02062008 No Chg-P CR2E034 (11/05)
			CE	4. FEI Number Applied For
·				20-3353222 Not Applicable
				t9.75 August
				5. Certificate of Status Desired Fee Required
	6. Name and Address of Current Regis	stered Agent	i	
PEREZ, M	IICHAEI			50 NOT 1100
287 PARK				DO NOT WRITE
MIAMI, FL	33126			IN THE SPACE
	(So 120)			IN THIS SPACE
			<u> </u>	
8. The above the obligat	named entity submits this statement for the tions of registered agent.	purpose of changing its register	ed office or register	red agent, or both, in the State of Florida. I am familiar with, and accept
	<u>\(\lambda \) \(\lambda \) \</u>			
SIGNATURE.	Signature, typed or printed name of registered agent and title	d service the desirence	d Annu singu sa	
6.45	Special special principles of registered again and the	(NOTE: Hegalite	d Agent signature required	d when reinstating) DATE
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	S. Election Campaign Finar Trust Fund Contribution.		.00 May Be ed to Fees
10.	OFFICERS AND DIRE	CTORS		· · · · · · · · · · · · · · · · · · ·
TITLE				
	P			
NAME	P HAWKINS, LINDA		1	
NAME STREET ADDRESS	1 -			
	HAWKINS, LINDA			
STREET ADDRESS	HAWKINS, LINDA 32 NE 1 AVE.			
STREET ADDRESS CITY-ST-ZIP TITLE NAME	HAWKINS, LINDA 32 NE 1 AVE.			
STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS	HAWKINS, LINDA 32 NE 1 AVE.			
STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS CITY-S1-ZIP	HAWKINS, LINDA 32 NE 1 AVE.			
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STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ST	HAWKINS, LINDA 32 NE 1 AVE. MIAMI, FL 33132	and accurate and that my signat	ture shall have the s	IN THIS SPACE In Chapter 119, Florida Statutes, I further certify that the information same level effect as if made under noth; that I am an officer or director.
STREET ADDRESS CITY-S1-ZIP TITLE MAME STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS CITY-S1-ZIP	HAWKINS, LINDA 32 NE 1 AVE. MIAMI, FL 33132	and accurate and that my signat	ture shall have the s	IN THIS SPACE In Chapter 119, Florida Statutes, I further certify that the information same level effect as if made under noth; that I am an officer or director.
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STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ST	certify that the information supplied with this of the property of the propert	and accurate and that my signat	ture shall have the s	IN THIS SPACE In Chapter 119, Florida Statutes, I further certify that the information same level effect as if made under noth; that I am an officer or director.